

## **Quick Reference Fee Schedule**

By Type of Activity (July 2010)

**Source**: State of Washington Dept. of Labor & Industries Medical Aid Rules and Fee Schedule For complete rules and policies regarding the billing of these codes see: www.Lni.wa.gov/ClaimsIns/Providers/Billing/FeeSched/default.asp

			7/1/2010
Description	Codes	Limits	Non-Facility Fee
Workers' Compensation Forms and Reports			
Report of Accident	1040M	AP only	\$37.84
Application to Reopen Claim	1041M	AP only	\$49.18
Loss of Earning Power, per insurer request	1027M	AP only	\$18.93
60 day report	99080	AP / psych service provider – 1 per 60 days	\$43.51
Occupational Disease History Form per insurer request	1055M	AP only	\$183.56
Opioids: Initial Report for treatment	1064M	AP only	\$56.77
Opioids: Initial Report for treatment 1064M AP only \$56.77	1057M	AP only	\$30.27
AP response to VRC/Employer request re: RTW	1074M	AP / psych service provider – one per day	\$30.27
Review of Job Descriptions or Analysis: first one reviewed	1038M	AP / psych service provider – on request	\$49.18
Review of Job Descriptions or Analysis: each additional review	1028M	AP / psych service provider – per review	\$36.89
Review of video material (report) per insurer request	1066M	AP only – per request	By Report
Activity Prescription Form per insurer/VRC request	1073M	AP only (with ROA**) or per insurer/VRC request	\$49.18
(** if restricted work or not released to work)			
Care, Evaluation, and Management			
Team conference, patient present	Approp. Level E&M	Physician only	Varies by code
Team conference, patient not present	99367	Physician only	\$137.97
Team conference, patient present	99366	Non-physician	\$69.90
Team conference, patient not present	99368	Non-physician	\$60.78
Telephone calls with employer, claim manager, other providers, or VRC	99441 - 99443	Physician only	\$23.10 - \$65.03
Telephone calls with employer, claim manager, other providers, or VRC	98966 - 98968	Non-physician	\$23.10 - \$65.03
Electronic communication (Physician)	99444	Physician only	\$44.37
Electronic communication (Non-physician)	98969	Non-physician	\$44.37
Consultation including report	99241 – 99245	MD, DO, DC, ARNP	\$81.45 - \$377.44
Chiropractic care	2050A – 2052A	One per day	\$41.20 - \$64.29
Physical medicine procedures by non physical medicine AP	1044M	6 visits per claim	\$43.06
Mileage per mile over 14 miles	1046M	Prior authorization	\$4.86
			<u> </u>
IME Reviews and Impairment Rating by Attending Doctor			
AP review of IME Report written by another doctor per insurer request	1063M	AP only	\$37.84
AP written report after reviewing an IME written by another doctor	1065M	AP only, per request	\$28.37
Impairment Rating by AP per insurer request	1190M – 1192M	AP only	\$439.50 - \$616.93
Impairment Rating Addendum Report per insurer request	1198M	AP only	\$113.40

AP = Attending provider types (including doctors, PA-C and ARNP) Non-physician: ARNP, PA, PhD, PT and OT must bill using non-physician codes. ARNP and PA-C providers are paid at a maximum of 90% of the allowed fee.

F245-387-000 [10-2010]

## **Quick Reference Authorization Guide 2010**

	Prior	Notes			
Description	Auth	Notes (PHL = Provider Hotline)	Who to Contact	Phone Number	
	Required?				
Note: If prior authorization is required a 'Y' will be displayed in the prior auth. column (last) of the fee schedule for each CPT or HCPCS code.					
Braces, crutches, and standard DME	Not usually	Check prior auth. column of HCPCS fee schedule: www.Lni.wa.gov/ClaimsIns/Files/ProviderPay/FeeSchedules/2010FS/fsHcpcs.pdf	Provider Hotline	1-800-848-0811	
Chemical dependency treatment	Yes		*Claim Manager	1-800-831-5227	
Consultations with specialists	No, unless	An Independent Medical Exam pending or for all Mental Health treatment	*Claim Manager	1-800-831-5227	
Diagnostic or therapeutic injections	Yes		*Claim Manager	1-800-831-5227	
EMGs, NCVs, & arthrograms	No				
Hearing aids/masking devices	Yes	Complete and fax the <i>Hearing Aid Purchase and repair Authorization Request</i> form (F245-384-000). Form: <a href="https://www.Lni.wa.gov/Forms/pdf/F245-384-000.pdf">www.Lni.wa.gov/Forms/pdf/F245-384-000.pdf</a>	Provider Hotline	Fax: 360-902-6490 1-800-848-0811	
Home care, skilled nursing facility or discharge planning	Yes	Prior authorization is required by an L&I Occupational Nurse Consultant (ONC).  Contact the claim manager for the ONC assigned to the claim.	*Claim Manager	1-800-831-5227	
Home or vehicle modifications	Yes		*Claim Manager	1-800-831-5227	
Inpatient hospital admission	Yes		Qualis Health	1-800-541-2894	
IV antibiotics	Yes	Prior authorization is required by an L&I Occupational Nurse Consultant (ONC). Contact the claim manager for the ONC assigned to the claim.	*Claim Manager	1-800-831-5227	
Massage Therapy – 1 <sup>st</sup> 6 visits on a claim  Over 6 visits on a claim	No Yes	After first 6 visits, complete and fax the following form: www.Lni.wa.gov/forms/pdf/F248-357-000.pdf	Provider Hotline	Fax: 360-902-6490 1-800-848-0811	
Mental health treatment	Yes	Only psychiatrists, psychologists and psychological ARNP'S can treat.	*Claim Manager	1-800-831-5227	
Medications	In some cases	Formulary: www.Lni.wa.gov/ClaimsIns/Files/Providers/DrugFormulary.pdf		1-888-443-6798	
MRIs, CAT scans (Advanced Imaging)  Standing MRI is not covered.	In most cases	** All Advanced Imaging Utilization Review program users must register first through Qualis at: <a href="http://qualishealth.org/cm/washington-landi/imaging.cfm">http://qualishealth.org/cm/washington-landi/imaging.cfm</a>	Qualis Health	1-800-541-2894	
Office visits, including chiropractic care	No, except.	Authorization required office visits in excess of 20 visits or occur more than 60 days after the first date you treat the worker.	*Claim Manager	1-800-831-5227	
Opioids for chronic, noncancer pain (covered with proper documentation)	Yes	www.Lni.wa.gov/ClaimsIns/Files/OMD/MedTreat/Opioids.pdf	*Claim Manager	1-800-831-5227	
Outpatient surgery		Utilization Review List:			
<ul> <li>On the Utilization Review list</li> </ul>	Yes	www.Lni.wa.gov/ClaimsIns/Providers/Treatment/UtilReview/	Qualis Health	1-800-541-2894	
Not on Utilization Review list	Yes		*Claim Manager	1-800-831-5227	
Pain Clinic	Yes		*Claim Manager	1-800-831-5227	
Physical Therapy or Occupational Therapy		For more information visit: www.Lni.wa.gov/ClaimsIns/Providers/Manage/RTW/Therapy/default.asp			
<ul> <li>1<sup>st</sup> 12 visits on a claim</li> </ul>	No				
• Visits 13–24, including work conditioning	Yes	After 12 visits, complete and fax the following form: www.Lni.wa.gov/Forms/pdf/F248-055-000.pdf	Provider Hotline	Fax: 360-902-6490	
<ul> <li>Over 24 visits, including work conditioning</li> </ul>	Yes	After 24 visits, Contact Qualis Health	Qualis Health	1-800-541-2894	
<ul> <li>Work hardening</li> </ul>	Yes	Approved providers only	*Claim Manager	1-800-831-5227	
Routine x-rays & lab	No				
Surgical appliances	In some cases	To verify: www.Lni.wa.gov/ClaimsIns/Files/ProviderPay/FeeSchedules/2010FS/FSMedSurgSup.pdf	Provider Hotline	1-800-848-0811	
Transportation – Cabulance & Taxi	Yes	See WAC 296-20-1103: http://apps.leg.wa.gov/wac/default.aspx?cite=296-20-1103	*Claim Manager	1-800-831-5227	

<sup>\*</sup> Call the claim manager (CM) direct line, if known. If not, you may contact the Claim Information line (IVR) at 1-800-831-5227 to obtain the cm's name and phone number.

<sup>\*\*</sup> Effective June 1, 2010, Qualis Health implemented a new utilization review program for all Advanced Imaging in support of House Bill 2105. All Advanced Imaging Utilization review program users will need to register first, even if they already have an iEXCHANGE® login. For program registration and to find out more visit: <a href="http://qualishealth.org/cm/washington-landi/imaging.cfm">http://qualishealth.org/cm/washington-landi/imaging.cfm</a>